



Informal Proceeding Request

Case No. DR- _____

Date: _____

Your Full Name	Other Party's Full Name
Your Street Address	Other Party's Street Address
City, State, Zip Code	City, State, Zip Code
Your Phone Number	Other Party's Phone Number
Your Email	Other Party's Email

The current Order in effect is: Sole Residential Parenting Plan
 Primary Residential with: _____
 Shared Parenting Plan
 Other

Please include a copy of your current order with this form.

Name(s) of your children:	Date of birth:

The problem with your current arrangement is:

Submit this completed form and current parenting order to fcs@dr-court.org or fax to **(330) 643-2191**.
 Attach additional information if necessary.

A copy of this completed form will be mailed to the other parent.

FOR COURT STAFF ONLY:

Meeting Date: _____ Meeting Time: _____ Case Closed: _____

Resolved Referred to Mediation Unable to resolve Not appropriate forum

No response from either party Initiated Court proceedings

Recommendation: